

COUNTY OF LOS ANGELES DEPARTMENT OF AUDITOR-CONTROLLER

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TO: Supervisor Don Knabe, Chairman

Supervisor Gloria Molina

Supervisor Yvonne Brathwaite Burke

Supervisor Zev Yaroslavsky

Supervisor Michael D. Antonovich

FROM: J. Tyler McCauley

Auditor-Controller

SUBJECT: **GROUP HOME PROGRAM MONITORING REPORT – CLEO'S GROUP**

HOME

Background

We have completed a review of Cleo's Group Home. Cleo's contracts with the Department of Children and Family Services (DCFS) and Probation Department. Cleo's is a six-bed facility, located in the Second Supervisorial District, that provides care for children ages 6-13 years who are developmentally disabled. At the time of the monitoring visit, Cleo's was providing services for four Los Angeles County DCFS children.

Scope of Review

The purpose of the review was to verify that Cleo's was providing the services outlined in its Program Statement. Additionally, the review covered basic child safety and licensing issues and included an evaluation Cleo's Program Statement, internal policies and procedures, child case records, a facility inspection, and an interview with one child placed with Cleo's at the time of the monitoring visit. The interview with the resident was designed to obtain his perspective on the program services provided by Cleo's and to ensure adherence to the Foster Youth Bill of Rights.

Summary of Findings

The review disclosed that Cleo's was not complying with a significant number of contract requirements. In addition, of major concern was a seventeen year old mentally challenged resident, who did not meet the facility's population agerequirement, whose needs were not being adequately met. The DCFS Children's Social Worker failed to ensure he was placed in an age-appropriate facility that could more adequately meet his needs.

Cleo's management needs to:

- adhere to the facility's Program Statement regarding population criteria or obtain an exemption for each resident that does not meet the criteria;
- make substantial repairs to its facility;
- supply residents with an adequate amount of bath towels and wash cloths;
- furnish residents with age-appropriate outdoor recreational equipment;
- develop Needs and Services Plans that accurately reflects each resident's needs;
- create comprehensive Quarterly Reports that focus on the goals of the Needs and Services Plans;
- counsel staff regarding appropriate interaction with residents and monitor the staff's behavior:
- provide residents with clothing that meets DCFS' clothing standards for quality and quantity;
- allow age-appropriate residents, who are able, to select their own clothing;
- provide residents with fifty dollars a month clothing allowance and properly maintain clothing allowance logs as required;
- maintain documentation that residents receive at least the required minimum weekly allowance; and
- provide an adequate supply of toiletries to residents;

DCFS management needs to ensure the seventeen year old is immediately placed in an appropriate facility and take corrective actions to ensure future misplacements do not occur.

Review of Report

We discussed our report with the agency's management. The agency's management is required to provide DCFS with a written corrective action plan within fifteen days from the receipt of this report. We thank the management and staff for their cooperation during our review.

DCFS staff indicated they will review the placement of the particular child discussed in this report.

If you have any questions, please contact me, or have your staff contact Patrick McMahon at (213) 974-0729.

JTM:PM:CC

Attachment

c: David E. Janssen, Chief Administrative Officer Violet Varona-Lukens, Executive Officer Public Information Audit Committee David Sanders, Ph.D., Director, DCFS Richard Shumsky, Chief Probation Officer CLEO'S GROUP HOME 13708 S. San Pedro St. Los Angeles, CA 90061 (310) 329-0316

License No.: 191800279
Rate Classification Level: 6

I. FACILITY AND ENVIRONMENT

(Facility Based - No Sample)

Method of assessment – Observation and resident interviews

Sample size for resident interviews: One

Comments:

Cleo's Group Home is nicely maintained and blends in with the other houses on the street. However, in the back yard there were several items presenting a safety hazard. A large plastic play gym was unstable and broken, a shade canopy was damaged, and a rusty metal picnic table had sharp edges.

The interior of the home had a homelike atmosphere. The facility was neat and clean with nicely decorated common rooms. However, there were significant areas needing improvement.

The living room curtains and blinds needed cleaning. The dining room floor was chipped, cracked, and worn, and the hallway connecting to the resident bedrooms was dark and needed a light fixture added.

In bedroom number one, the floor was worn, the bed frames on both beds were loose, the window coverings needed replacing, and the wall behind the door needed repair.

In bedroom number two, the box spring on one bed was damaged, the bed frames on both beds were loose, and there were no comforters or spreads on the beds. In bedroom number three, the bed pillows were stained and the pull handles on the dresser drawers were missing.

In the resident bathroom, the linoleum floor was chipped and peeling. Around the tub there was a build-up of mildew and soap scum, and the light needed a cover.

The supply of bed linens was adequate. However, bath towels and washcloths for the household were inadequate. There were not enough for each child to have two sets.

There was age-appropriate in-house play equipment including electronic games, a computer with a variety of programs, books, and resource material. However, there was no outside recreational equipment for the residents such as skates, bikes, or balls.

There was a sufficient supply of properly stored frozen foods, meat, canned goods, bakery items, and fresh fruit.

Recommendations

1. Cleo's management:

- a. Repair/Remove the plastic play gym in the back yard.
- b. Repair/Replace the shade canopy in the back yard.
- c. Remove/Replace the rusty picnic table in the back yard.
- d. Clean the window coverings in the living room.
- e. Repair/Replace the floor in the dining room, bedroom number one, and the resident bathroom.
- f. Install lighting in the hallway.
- g. Tighten the bed frames in bedrooms number one and two.
- h. Replace the window coverings in bedroom number one.
- i. Repair the wall in bedroom number one.
- j. Replace the box spring in bedroom number two.
- k. Provide bedspreads or comforters on the beds in bedroom number two.
- I. Replace the stained pillows in bedroom number three.
- m. Repair the dresser drawers in bedroom number three.
- n. Clean around tub the area to remove mildew and scum in the resident bathroom.
- o. Provide a cover for the light in the resident bathroom.
- p. Supply residents with second set of bath towels and washcloths.
- q. Provide residents with age-appropriate outdoor recreational equipment.

II. PROGRAM SERVICES

Method of assessment – Review of relevant documents and resident interviews

Sample size for review of documents: Two Sample size for resident interviews: One

Comments:

Note: The population of Cleo's is mild to severely mentally challenged. At the time of the review, only one resident was able to participate in the interview process, although two files were reviewed.

Both residents received an initial diagnostic assessment after being admitted into the program. One resident met Cleo's population criteria as outlined in their program statement. The other resident was seventeen years old, did not meet the facility's population age criteria (ages six to thirteen), and had no waiver (exemption) on file. According to the owner, the agency was in the process of getting an exemption for the resident.

The seventeen year old resident was severely mentally challenged and the facility did not have proper staff to assist him with tasks such as bathing. The only staff available to assist him was a female staff who disclosed that she had no special training and was uncomfortable with the task. The resident's Children's Social Worker was also contacted who stated that she felt moving the resident would be detrimental to him because he had been in the home for several years.

One resident's Needs and Services Plan (NSP) was specific, measurable, attainable, and realistic. However, the Quarterly Report did not focus on the goals in his NSP.

The other resident's NSP was specific and measurable, but did not adequately discuss how the resident's needs were being met or whether transfer to an age-appropriate facility where he could receive the services needed was being considered. In addition, the Quarterly Report did not specifically address the resident's needs.

Both residents were receiving individual and group therapy.

Recommendations

2. Cleo's management:

a. Adhere to the facility's Program Statement regarding population age criteria or obtain an exemption for each resident that does not meet the criteria.

- b. Develop Needs and Services Plans that accurately reflect each resident's needs.
- c. Create comprehensive Quarterly Reports that focus on the goals of the Needs and Services Plans.

DCFS management needs to ensure the seventeen year old is immediately placed in an appropriate facility and take corrective actions to ensure future misplacements do not occur.

III. EDUCATIONAL AND EMANCIPATION SERVICES

Method of assessment – Review of relevant documents and resident interviews

Sample size for review of documents: Two Sample size for resident interviews: One

Comments:

Both residents were attending public school and had current Individualized Education Plans. Both records contained report cards and/or progress reports. The seventeen year old resident also attended South Central Los Angeles Regional Center.

The interviewed resident reported that he was provided with a sufficient amount of educational stimulation away from school on a daily basis and that staff supported his academic progress.

Due to the functioning level of the residents, they were unable to manage their allowances without assistance from staff.

Recommendations

There are no recommendations for this section.

IV. RECREATION AND ACTIVITIES

Method of assessment – Review of relevant documents and resident interviews

Sample size for review of documents: Two Sample size for resident interviews: One

Comments:

Cleo's followed a monthly activity schedule developed by staff and residents. In addition, residents could request specific activities at any time.

Residents were encouraged to participate in activities they desired and had the opportunity to play table games, read, or play with their toys at free times during the day.

Transportation was provided to and from activities.

Recommendations

There are no recommendations for this section.

V. PSYCHOTROPIC/OTHER MEDICATION

Method of assessment - Review of relevant documents

There were four residents placed in Cleo's at the time of the review. A review of case files was conducted for the four residents prescribed psychotropic medications.

Comments:

Cleo's maintains appropriate medication logs, current court authorizations, and psychiatric evaluations for the residents receiving psychotropic medications.

Recommendations

There are no recommendations for this section.

VI. PERSONAL RIGHTS

Method of assessment – Resident interviews

Sample size for resident interviews: One

Comments:

The resident was presented with the facility's policies, rules, and regulations when arriving in placement and stated that the rules were generally fair as was the consequences for not following them.

The resident reported that overall he liked and felt safe in the home. However, he reported that one staff sometimes treated him mean. This was discussed with management during the exit conference who stated that the matter would be addressed immediately.

Resident chores included the maintenance of their rooms and removing dishes from the table if they wanted to help staff. The resident did not feel that the chores were too demanding.

The resident was able to have telephone contact with his placement worker as needed. Phone calls and visits were permitted with sufficient privacy and the resident felt his rights were respected with regard to health services and religion. He also felt that staff was culturally sensitive to each resident's background and ethnicity.

The resident was aware of his legal right to refuse medication.

Recommendations

3. Cleo's management counsel staff regarding appropriate interaction with residents and monitor the staff's behavior.

VII. CLOTHING AND ALLOWANCE

Method of assessment – Review of relevant documents and resident interviews

Sample size for review of documents: Two Sample size for resident interviews: One

Comments:

The clothing did not meet DCFS' clothing standard for quality and quantity. The resident did not have a sufficient amount of clothing. In addition, his clothing appeared too small and his shoes were worn. In addition, the resident was not able to choose his own clothes. This was discussed with the owner who stated that, in the future, those residents who are capable will be allowed to participate in the selection of their clothing.

Clothing logs were not being maintained properly. The logs did not reflect the date, amount received, amount spent, and a balance for each resident as required by the Statement of Work. In addition, purchased clothing receipts were not available for review.

The resident did not know how much allowance he received weekly. Allowance logs were not maintained for the residents; therefore, a review was not possible. This was discussed with management during the exit conference who stated that there were no records.

Cleo provided residents with personal care items, although resident supplies were low for hair products such as conditioners, hair oil, brushes, and combs. Sufficient, secure storage space was provided.

The resident had a life book.

Recommendations

- 4. Cleo's management:
 - a. Provide residents with clothing that meets DCFS' clothing standards for quality and quantity.
 - b. Allow age-appropriate residents who are able, to select their own clothing.
 - c. Provide residents with fifty dollars a month clothing allowance and properly maintain clothing allowance logs as required by the Statement of Work.
 - d. Maintain documentation that reflects residents receive at least the required minimum weekly allowance.
 - e. Provide an adequate supply of hair products for residents.